
State: Arkansas **Filing Company:** State Mutual Insurance Company
TOI/Sub-TOI: MS09 Medicare Supplement - Other 2010/MS09.000 Medicare Supplement Other 2010
Product Name: State Mutual Insurance Company 2012 Multiple Policy Report
Project Name/Number: SM MP RPT AR/

Filing at a Glance

Company: State Mutual Insurance Company
Product Name: State Mutual Insurance Company 2012 Multiple Policy Report
State: Arkansas
TOI: MS09 Medicare Supplement - Other 2010
Sub-TOI: MS09.000 Medicare Supplement Other 2010
Filing Type: Form
Date Submitted: 01/22/2013
SERFF Tr Num: IASL-128860061
SERFF Status: Closed-Accepted For Informational Purposes
State Tr Num:
State Status: Closed-Accepted for Informational Purposes
Co Tr Num: SM MP RPT AR

Implementation: On Approval
Date Requested:
Author(s): Lauren Perley
Reviewer(s): Stephanie Fowler (primary)
Disposition Date: 01/23/2013
Disposition Status: Accepted For Informational Purposes
Implementation Date:

State Filing Description:

State: Arkansas **Filing Company:** State Mutual Insurance Company
TOI/Sub-TOI: MS09 Medicare Supplement - Other 2010/MS09.000 Medicare Supplement Other 2010
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Project Name/Number: SM MP RPT AR/

General Information

Project Name: SM MP RPT AR

Project Number:

Requested Filing Mode: Informational

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Deemer Date:

Submitted By: Lauren Perley

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Individual Market Type:

Filing Status Changed: 01/23/2013

State Status Changed: 01/23/2013

Created By: Lauren Perley

Corresponding Filing Tracking Number:

Filing Description:

In accordance with your state's Medicare Supplement regulations, Insurance Administrative Solutions, L.L.C. is providing you with the 2012 Multiple Policy Report due March 1, 2013 for State Mutual Insurance Company, NAIC #69132.

This Report includes both 1990 and 2010 Plans.

Company and Contact

Filing Contact Information

Lauren Perley, Lauren.Perley@iasadmin.com
8545 126th Avenue North, Suite 727-584-0007 [Phone]
200 727-584-5613 [FAX]
Largo, FL 33773-1502

Filing Company Information

(This filing was made by a third party - insuranceadministrativesolutions)

State Mutual Insurance Company	CoCode: 69132	State of Domicile: Georgia
210 East Second Avenue	Group Code:	Company Type:
Rome, GA 30162	Group Name:	State ID Number:
(706) 291-1054 ext. [Phone]	FEIN Number: 58-1449898	

Filing Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

SERFF Tracking #:	IASL-128860061	State Tracking #:		Company Tracking #:	SM MP RPT AR
State:	Arkansas	Filing Company:	State Mutual Insurance Company		
TOI/Sub-TOI:	MS09 Medicare Supplement - Other 2010/MS09.000 Medicare Supplement Other 2010				
Product Name:	State Mutual Insurance Company 2012 Multiple Policy Report				
Project Name/Number:	SM MP RPT AR/				

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Informational Purposes	Stephanie Fowler	01/23/2013	01/23/2013

State:	Arkansas	Filing Company:	State Mutual Insurance Company
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Disposition

Disposition Date: 01/23/2013

Implementation Date:

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	Health - Actuarial Justification		No
Supporting Document	Outline of Coverage		No
Supporting Document	State Mutual Multiple Policy Report due March 1, 2013	Accepted for Informational Purposes	Yes
Supporting Document	Third Party Authorization Letter	Accepted for Informational Purposes	Yes

State:	Arkansas	Filing Company:	State Mutual Insurance Company
TOI/Sub-TOI:	MS09 Medicare Supplement - Other 2010/MS09.000 Medicare Supplement Other 2010		
Product Name:	State Mutual Insurance Company 2012 Multiple Policy Report		
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Supporting Document Schedules

		Item Status:	Status Date:
Bypassed - Item:	Flesch Certification		
Bypass Reason:	Not Applicable - Filing Annual Report		

		Item Status:	Status Date:
Bypassed - Item:	Application		
Bypass Reason:	Not Applicable - Filing Annual Report		

		Item Status:	Status Date:
Bypassed - Item:	Health - Actuarial Justification		
Bypass Reason:	Not Applicable - Filing Annual Report		

		Item Status:	Status Date:
Bypassed - Item:	Outline of Coverage		
Bypass Reason:	Not Applicable - Filing Annual Report		

		Item Status:	Status Date:
Satisfied - Item:	State Mutual Multiple Policy Report due March 1, 2013	Accepted for Informational Purposes	01/23/2013
Comments:			
Attachment(s):			
AR RPT.pdf			

		Item Status:	Status Date:
Satisfied - Item:	Third Party Authorization Letter	Accepted for Informational Purposes	01/23/2013
Comments:			
Attachment(s):			
2013 01 SM IAS Authorization Letter.pdf			

**FORM FOR REPORTING
MEDICARE SUPPLEMENT POLICIES
STATE OF ARKANSAS**

Company Name: NAIC #69132 STATE MUTUAL INSURANCE COMPANY

Address: c/o Insurance Administrative Solutions, LLC
8545 126th Avenue N, Suite 200
Largo, FL 33773-1502

Phone Number: 877-777-2443

Due March 1, annually

The purpose of this form is to report the following information on each resident of this state who has in force more than one Medicare supplement policy or certificate. The information is to be grouped by individual policyholder.

Policy and Certificate #	Date of Issuance
NONE TO REPORT	



Signature

Lauren Perley, Compliance Analyst

Name and Title (please type)

January 22, 2013

Date



RICHARD H. BURTON
VICE PRESIDENT AND CORPORATE COMPLIANCE OFFICER

January 7, 2013

Ms. Darcey Shaffer, FLMI, ACS
Compliance Manager
Insurance Administrative Solutions, L.L.C.
8545 126th Avenue North, Suite 200
Largo, Florida 33773-1502

**Re: Life and Health Filings for Rate Increases, Forms and Reporting
Requirements for State Mutual Insurance Company**

Dear Ms. Shaffer:

This letter authorizes Insurance Administrative Solutions, L.L.C. to file on behalf of State Mutual Insurance Company all rate increases, forms and reporting requirements for the Company's Life and Health Insurance Policies with the State Insurance Departments.

Insurance Administrative Solutions, L.L.C. may correspond with the State Insurance Departments regarding any questions they may have concerning the filings.

A copy of this letter is as valid as the original. This authorization will be valid for twelve months from the date of this letter.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Richard Burton', written over a horizontal line.

Richard Burton